

Did you know that in Kentucky, it is illegal to transport an ice cream cone in your pocket? Or that in Cleveland, Ohio, it is illegal to catch mice without a hunting license? One more “strange and freaky” law to entertain you—in Florida, it is illegal to sing in a public place while attired in a swimsuit.

Of course, I open with these statements to get your attention, but also to make a point that not only laws, but particularly the rules and regulations that accompany them, although perhaps not appropriately described as “strange and freaky”, none-the-less, make no sense in the day-to-day workings on the street.

Very early on in the writing (and re-writing) of the Older Americans Act, Congress recognized that the day-to-day workings on the street were important to successful implementation of the Act. Therefore, they created a structure built around local and regional organizations known as Area Agencies on Aging who were to be stewards of federal dollars and responsible for identifying community needs and establishing plans to meet those needs. Where the concern comes about, as we attempt to meet needs of older Americans, including the up-and-coming older Americans, is how much the accompanying rules and regulations restrict creativity, choice, responsiveness, positive outcomes—many of the values emerging as important today and into the future. Allow me to provide a few coherent examples.

1. The requirement that participants routinely complete the Determine Your Nutritional Health screen. The concern is not towards the screening tool and its importance. The concern is that the requirement is equal to an unfunded mandate, which causes those responsible for administering the tool to be unresponsive toward positive outcomes.

2. The earmarking of dollars to provide specific programs, such as Medications Management. Generally, earmarking of dollars diminishes the ability of Area Agencies on Aging to provide choices that are client driven. Specifically, in the case of Medications Management, by the time the dollars reach this Area Agency on Aging they amount to \$3,680. How can we be efficient, effective, and responsive to a client base of more than 30,000 seniors with \$3,680 earmarked to help manage their medications?
3. Some in the audience are familiar with the acronym NAPIS—that stands for National Aging Program Information System. NAPIS represents the collection, input, and reporting of data designed to make the aging network accountable for the work performed. At the same time the network has been deemed “more accountable”, let me assure you it is not taking into account the amount of resources including staff time, supplies, equipment, software, and contracts required to be accountable. What is more a travesty is the unwarranted amount of resources diverted away from direct service to those most in need. Within a few short years of implementation, NAPIS jargon was overshadowed by the need for outcome measures. What I would like to have said is that NAPIS jargon was replaced by outcome measures. Instead, what we have is another layer of accountability, at the cost of serving people I might add, that is diverting resources away from providing direct service. Its not accountability that rankles us, it's the layer after layer of regulation that is heaped on and often times outdated, but oh so invested in (like the law

in Boston that predates returnable bottles and cans making it illegal to rummage through rubbish containers).

One last example will tie in well to the question of the day—"What are the issues of concern, especially as they apply to the baby boom generation?" Over the next ten years the correct answer is less likely to fall into the category of "What's in it for me" than "What's in it for my parents." It is not impractical to expect that resources will not be available to meet every need, wish, or desire before us. Because that is the case today, Area Agencies on Aging and service providers are forced into setting priorities as to which deserving individual will receive services today and which ones will be placed on a waiting list. Federal law defines our target population as advanced in age, those living in poverty or living alone, minorities, and individuals residing in rural areas. I take the liberty to add that the last re-authorization of the Older Americans Act placed significant emphasis on rural outreach. When it comes to administering the distribution of dollars, rules and regulations are in direct conflict with the wishes of congress because allocation of resources does not take into account these targeting factors, except in the case of the National Family Caregiver Support Program.

Economists in the United States Department of Agriculture recently determined that overall, rural areas receive slightly less funding per capita (\$6,020) than metropolitan areas (\$6,131). ("Federal Funding for Rural America: Who Gets What?" By R. J. Reeder and S.D. Calhoun. Amber Waves, September 2002.) What is of particular concern is that in rural areas there are too few alternative sources of employment, it is more expensive to provide public and private services,

attracting doctors is hampered by too few patients to pay the bills, and service delivery is more difficult and costly to provide. Furthermore, relationships with local governments have been easy to maintain as long as there is an understanding that the tax base is no place to look for local support to match federal dollars.

When it comes to coordination of services, all I can speak to is northern Idaho, where it is not uncommon to hear working professionals speaking with pride about their efforts to work collectively at making what available resources we have reach as many people in need as possible. Many of these hard working professionals are here today in the audience and may likely testify to concerns that relate directly or indirectly to rules and regulations that unduly restrict services—like the lack of local match to secure available federal funds for transportation.

The values of creativity, choice, responsiveness, and positive outcomes are intertwined in the views of the “baby boom” generation. But without more flexibility, without returning to the early vision of the Older Americans Act where local folks are to take responsibility for identifying local needs and solutions to meet those needs, these values will be stagnated by constraints imposed on them through administrative interpretation.

One last strange and freaky law relevant to the “baby boom” generation, in the hippy-dippy late ‘60s, Youngstown, Ohio, briefly had a law making it illegal to walk barefoot through town.